



Center for
Elder Justice
& Policy

875 Summit Avenue
St. Paul, Minnesota
55105-3076

Phone: 651-290-6319
Fax: 651-290-6426
cej@wmitchell.edu

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The Honorable Betty McCollum
U.S. House of Representatives
1714 Longworth House Office Building
Washington, DC 20515

Dear Representative McCollum:

The March 2010 enactment of the Elder Justice Act was a victory for those who advocated its passage for many years. Its enactment, as part of the Patient Protection and Affordable Care Act (PPACA, Subtitle H, Sec. 6701), established a federal commitment to eliminating elder abuse, neglect, and financial exploitation. Today, that work is in peril because of actions to repeal health reform law, and we request your leadership to oppose backtracking on elder justice.

The Elder Justice Act would provide the first federal dedicated money for adult protective services in each state. Minnesota's elderly population is nearing 900,000, and the share, contingent on appropriations, would be \$1,566,435 annually for the 3 years of authorization. Beyond adult protective services front-line staff, the Act promises demonstration grants to improve methods of preventing and detecting abuse, funds to establish stationery and mobile elder abuse forensic centers, funds for the long-term care ombudsman program, and support for recruitment and training initiatives to support quality long-term care facilities.

Moreover, the PPACA included authorization to expand an existing pilot program to improve criminal background checks for workers who provide direct care to vulnerable adults. These funds were appropriated earlier, and Minnesota would need only to apply for the funds (\$3 million) and promise a state match. Nursing home transparency provisions in the PPACA improve the disclosure requirements about ownership, suppliers, and financial relationships, as well as cost reports and staffing.

These brief summaries are no more than highlights, while it is the depth and breadth of these reforms that will be lost in the event of repeal. Protecting vulnerable adults from abuse, neglect and exploitation should be recognized as an issue of public health, with a risk not only to individuals and families but to society. Scholars in the field are just beginning to research the cost in public dollars when financial exploitation robs someone of independence or when abuse and neglect create the need for costly medical interventions.

We thank you for taking these issues into consideration as the debate over health care reform begins anew.

Sincerely,

Iris C. Freeman, Associate Director
Center for Elder Justice and Policy